

ENTRY BLANK

PLEASE TYPE OR PRINT

☒ Entered previous May Show

☒ Ms.

☐ Mr. Artist

ROSE TICHY

(Last Name Last)

Permanent

Address 7537 BRIARCLIFF PKWY - CLEVELAND

Street

City

44130

Tel. (216) - 234-7654

Zip

Area Code

Temporary

Address

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county? CUYAHOGA

Born in Cuyahoga County ☒ Yes ☐ No

Collaborator

(If Any)

If entries are not accepted or not sold:

☒ Artist will pick up entries at Museum.

☐ Museum should dispose of entries.

☐ Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature

Rose Tichy

ENTRY BLANKS

1

- ☐ 1. Paintings ☐ 2. Graphics ☒ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Photo

Title

CHURCH

Price or NFS

Insurance Value
If NFS Only

Size

\$35-
framed
w. mat.

11" x 14"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

3

4

\$15-

DO NOT WRITE IN THIS SECTION

137 (3)

ACCEPTED

REJECTED

1 X

FEE PAID

BY

3/22

MAA

2

- ☐ 1. Paintings ☐ 2. Graphics ☒ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Photo

Title

THE SERMON

Price or NFS

Insurance Value
If NFS Only

Size

\$35-
framed
w. mat.

14" x 17"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

4

5

\$15-

DO NOT WRITE IN THIS SECTION

138 (3)

ACCEPTED

REJECTED

X

RECEIVED

BY

4-22

MPB

DO NOT DETACH

1974 MAY SHOW

The Cleveland Museum of Art

Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	ROSE TICHY
Address	7537 BRIARCLIFF PKWY
City & State	CLEVELAND - OHIO Zip 44130

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your
notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

Rose Tichy

1 dups

June 17 '74

DO NOT DETACH



1

☐ 1. Paintings

☐ 2. Graphics

☒ 3. Photography

☐ 4. Sculpture

☐ 5. Electric

☐ 6. Crafts

Medium or Materials

Photo

Title

4)

CHURCH

DO NOT WRITE IN THIS SECTION

137 (3)

ACCEPTED

X

REJECTED

Rose Tichy

4 dups

June 17 '74

DO NOT DETACH



2

☐ 1. Paintings

☐ 2. Graphics

☒ 3. Photography

☐ 4. Sculpture

☐ 5. Electric

☐ 6. Crafts

Medium or Materials

Photo

Title

5)

THE SERMON

DO NOT WRITE IN THIS SECTION

138 (3)

ACCEPTED

X

REJECTED